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CENTRAL FAX CENTER**AUG 30 2004****IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**In re Application of:
Octavius J. Morris

Serial No. 09/749,733

Filed: 12/27/2000

TITLE: METHOD AND APPARATUS FOR
CONVERTING DATA STREAMS

) Atty. Docket PHB 3445US

) Group Art Unit:
) 2663) Examiner:
) Richard Chang

VIA FACSIMILE TRANSMISSION TO (703) 872-9306
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Dear Sir:

In response to the Office Action dated May 28, 2004, the Applicants submit the following Amendment and Remarks for the above referenced application

By 

James D. Leimbach, Reg. No. 34,374
Patent Attorney (585) 381-9983

CERTIFICATE OF TRANSMISSION

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Serial No. 09/749,733

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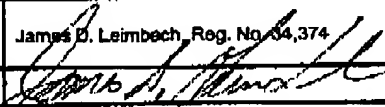
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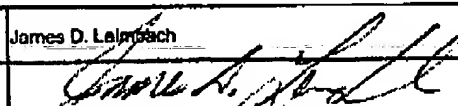
TRANSMITTAL FORM (to be used for all correspondence after initial filing)	Application Number	09/746,733	
	Filing Date	12/27/2000	
	First Named Inventor	Octavio J. Morris	
	Art Unit	2663	
	Examiner Name	Richard Chang	
Total Number of Pages in This Submission	12	Attorney Docket Number	PHB34445

ENCLOSURES (Check all that apply)		
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation <input type="checkbox"/> Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____	<input type="checkbox"/> After Allowance communication to Technology Center (TC) <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Other Enclosure(s) (please identify below): _____
Remarks An Amendment is transmitted on the first business day after the due date which was a Saturday. Therefore, no extension fee is required.		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm or Individual name	James D. Leimbach, Reg. No. 34,374
Signature	
Date	August 30, 2004

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Typed or printed name	James D. Leimbach		
Signature		Date	August 30, 2004

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